

## SENATE BILL No. 377

### DIGEST OF INTRODUCED BILL

**Citations Affected:** IC 16-21-10; IC 16-31-2-9.

**Synopsis:** Statewide trauma protocols. Requires specified hospitals to adopt written protocols concerning adult trauma care and pediatric trauma care. Requires the emergency medical services commission to adopt statewide protocols and regional protocols concerning the treatment of adult and pediatric trauma patients.

**Effective:** July 1, 2004.

**Broden**

January 12, 2004, read first time and referred to Committee on Health and Provider Services.

C  
o  
p  
y



Introduced

Second Regular Session 113th General Assembly (2004)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2003 Regular Session of the General Assembly.

## SENATE BILL No. 377

A BILL FOR AN ACT to amend the Indiana Code concerning health.

*Be it enacted by the General Assembly of the State of Indiana:*

1 SECTION 1. IC 16-21-10 IS ADDED TO THE INDIANA CODE  
2 AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE  
3 JULY 1, 2004]:

4 **Chapter 10. Hospital Protocol for Trauma Care**

5 **Sec. 1. (a) Before January 1, 2005, a hospital licensed under this**  
6 **article that is not designated by the American College of Surgeons**  
7 **as:**

8 (1) a level I or level II adult trauma care center; or

9 (2) a level I or level II pediatric trauma care center;

10 shall adopt written protocol concerning adult trauma care and  
11 pediatric trauma care provided by the hospital.

12 (b) A hospital licensed under this article that is designated by  
13 the American College of Surgeons as a level I or level II adult  
14 trauma care center but is not designated as a level I or level II  
15 pediatric trauma care center shall adopt written protocol for  
16 pediatric trauma care provided by the hospital.

17 (c) A hospital licensed under this article that is designated by the

2004

IN 377—LS 7247/DI 104+



C  
o  
p  
y

American College of Surgeons as a level I or level II pediatric trauma care center but is not designated as a level I or level II adult trauma care center shall adopt written protocol for adult trauma care provided by the hospital.

**Sec. 2. Protocol required under section 1 of this chapter must include policies and procedures concerning the following:**

(1) The evaluation of a trauma patient, including criteria to identify a trauma patient who requires a level of adult or pediatric trauma care that exceeds the hospital's capability.

(2) The emergency treatment and stabilization of a trauma patient before the patient is transferred to an appropriate level of adult or pediatric trauma center.

(3) The timely transfer of a trauma patient to an appropriate level of adult or pediatric trauma center based on the patient's medical needs, including the following:

(A) Notification of and consultation with the receiving hospital and confirmation of the receiving hospital's ability to provide prompt care for the patient's medical needs.

(B) Selection of an alternative appropriate adult or pediatric trauma center to receive the patient if medical personnel determine that it is not feasible or safe to transport a patient to a trauma center to which transfer was previously arranged.

(C) Transportation.

(D) Transfer of the patient's medical records to the receiving hospital.

(E) Responsibilities of the physicians attending the patient.

(4) Peer review and quality assurance for adult and pediatric trauma care provided in or by the hospital.

**Sec. 3. Except as provided under section 4 of this chapter, a hospital shall enter into the following written agreements:**

(1) An adult trauma patient transfer agreement:

(A) with one (1) or more adult trauma centers in each level designation that have a trauma center level designation reflecting the trauma center's ability to provide care for patients with a greater severity of illness than the hospital is qualified to provide; and

(B) that governs the procedure for transferring a patient from the hospital to the trauma center.

(2) A pediatric trauma patient transfer agreement:

(A) with one (1) or more pediatric trauma centers in each level designation reflecting the trauma center's ability to

**C  
o  
p  
y**



provide care for patients with a greater severity of illness than the hospital is qualified to provide; and

(B) that governs the procedure for transferring a patient from the hospital to the trauma center.

Sec. 4. (a) A hospital that is designated as a level I or level II adult trauma center is not required to enter into an adult trauma patient transfer agreement with another adult trauma center.

(b) A hospital that is designated as a level I or level II pediatric trauma center is not required to enter into a pediatric trauma patient transfer agreement with another pediatric trauma center.

Sec. 5. A hospital may not knowingly represent that the hospital is able to provide trauma care if the representation is inconsistent with the hospital's trauma center designation level. However, a hospital that operates an emergency facility may represent that the hospital provides emergency care.

Sec. 6. A hospital may not knowingly provide trauma care that is inconsistent with:

- (1) federal law;
- (2) state law;
- (3) a trauma care protocol required under this chapter; or
- (4) a trauma patient transfer agreement required under this chapter.

Sec. 7. A hospital may not knowingly transfer an adult or pediatric trauma patient:

- (1) to a hospital that does not have a trauma center designation level that is for the patient's severity of illness; or
- (2) in a manner that violates a trauma patient transfer agreement entered into by the hospital under this chapter.

SECTION 2. IC 16-31-2-9, AS AMENDED BY P.L.205-2003, SECTION 21, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2004]: Sec. 9. The commission shall establish the following:

- (1) Standards for persons who provide emergency medical services and who are not licensed or regulated under IC 16-31-3.
- (2) Training and certification standards for the use of automatic and semiautomatic defibrillators by first responders.
- (3) Training standards for the administration of antidotes, vaccines, and antibiotics to prepare for or respond to a terrorist or military attack.
- (4) Training and certification standards for the administration of epinephrine through an auto-injector by:
  - (A) an emergency medical technician; or
  - (B) an emergency medical technician-basic advanced.

C  
o  
p  
y



(5) Training standards to permit the use of antidote kits containing atropine and pralidoxime chloride for the treatment of exposure to nerve agents by an emergency medical technician-basic advanced, an emergency medical technician, or a first responder.

**(6) Statewide written protocols for a person who provides emergency medical services concerning the treatment of adult and pediatric trauma patients in Indiana. The protocols must do the following:**

**(A) Require that a trauma patient be transported directly to an adult or a pediatric trauma center that is qualified to provide the appropriate level of care necessary for the patient unless:**

**(i) it is medically necessary to transport the patient to another hospital for initial assessment and stabilization before transferring the patient to an adult trauma center or a pediatric trauma center;**

**(ii) it is unsafe or medically inappropriate to transport the patient directly to an adult trauma center or a pediatric trauma center due to adverse weather or ground conditions or excessive transport time;**

**(iii) transport of the patient to an adult trauma center or a pediatric trauma center would cause a shortage of local emergency medical service resources;**

**(iv) an appropriate adult trauma center or pediatric trauma center is unable to receive and provide trauma care to the patient without undue delay; or**

**(v) before transport of the patient, the patient requests transport to a particular hospital that is not a trauma center or, if the patient is less than eighteen (18) years of age or the patient is unable to communicate, the request is made by an adult member of the patient's family or a legal representative of the patient.**

**(B) Define adult trauma care and pediatric trauma care.**

**(C) Establish procedures to be used by medical personnel in evaluating whether a patient requires or would benefit from adult or pediatric trauma care.**

**(7) Regional written protocols for the treatment of adult and pediatric trauma patients. The regional protocols must do the following:**

**(A) Require a trauma patient to be transported to a trauma center that is able to provide an appropriate level of adult or pediatric trauma care.**

**C  
o  
p  
y**



1           **(B) Prohibit discrimination among adult and pediatric**  
2           **trauma centers by emergency medical personnel for**  
3           **reasons that are not related to the patient's medical needs.**  
4           **If a regional protocol adopted under this subdivision conflicts**  
5           **with a state protocol adopted under subdivision (6), the**  
6           **regional protocol controls.**

**C**  
**O**  
**P**  
**Y**

